| | ype a plus sign (+) inside this bo | LI | equired to res | | Trademark | Office: | PTO/SB/01 (03-01) through 10/31/2002. OMB 0651-0032 U.S. DEPARTMENT OF COMMERCE ess it contains a valid OMB control number. | | |
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| | DECLARATION FOR | R UTILITY OR | | Attorney E | ocket Num | ber | 00-0895-16/US | | |
| | DESIGN | | l | First Named Inventor | | | Patterson, et al. | | |
| | PATENT APPL | | | | | | TE IF KNOWN | | |
| | (37 CFR 1 | .63) | | Application Number | | | IL II TATOTTIC | | |
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| | Declaration | Declaration | 1 141-1 | Group Art | | | | | |
| | Submitted OR with Initial | Submitted after In Filing (surcharge (37 CFR 1.16(e)) required) | rge | Examiner | | | | | |
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| As a be | elow named inventor, I her | eby declare that: | | | | | , | | |
| Mv resi | dence, mailing address, and | l citizenship are as | stated be | low next to | my name | | j | | |
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| | | | | | | | nal, first and joint inventor (if plural | | |
| names | are listed below) of the subj | ect matter which is | claimed a | and for which | h is a pater | nt is so | ught on the invention entitled: | | |
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| Data | Communications System ar | nd Method for Con | nmunicati | on Between | n Infrared D | evices | 5 | | |
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| <u> </u> | | | Title of the | Invention) | | | | | |
| (Title of the Invention) | | | | | | | | | |
| The specification of which | | | | | | | | | |
| | is attached hereto | | | | | | | | |
| | OR | | | | | | | | |
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| | was filed on (MM/DD/YYYY) | L | | as | United State | s Appli | cation Number or PCT International | | |
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| Appli | cation Number | and v | was amend | ed on (MM/D | D/YYYY) | | (if applicable). | | |
| II hereby | v state that I have reviewed and | understand the cont | tents of the | above identi | fied specifica | tion, inc | cluding the claims, as amended by any | | |
| amendn | nent specifically referred to above | ve. | | | | | are signification, as amonasa by any | | |
| ll ackno | wladae the duty to disclose info | ormation which is mot | torial to not | ontobility on | dafinad in 27 | CED 4 | .56, including for continuation-in-part | | |
| applicati | ions, material information which | became available be | etween the | filing date of | the prior app | lication | and the national or PCT international | | |
| applications, material information which became available between the filing date of the prior application and the national filing date of the continuation-in-part application. | | | | | | | | | |
| I hereby | claim foreign priority benefits u | nder 35 U.S.C. 119(a | a)-(d) or 36 | 5(b) of any fo | reign applica | ation(s) | for patent or inventor's certificate, or States of America, listed below and | | |
| have als | so identified below, by checking | the box, any foreign | application | for patent or | inventor's ce | ertificate | states of America, listed below and b. or any PCT international application | | |
| have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | | | | |
| Pri | ior Foreign Application | Country | • | iling Date | Priorit | | Certified Copy Attached? | | |
| | Number(s) | | /IMIM/DE | D/YYYY) | Not Clair | iiea_ | YES NO | | |
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]
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DECLARATION - Utility or Design Patent Application Direct all correspondence to: Customer Number OR Correspondence address below or Bar Code Label PATENT & TRADEMARK OFFICE Name Address Address City State Zip Telephone Country Fax I hereby declare that all statements are made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name Family Name (first and middle [if any]) Wade C. or Surname Patterson Inventor's Date 10-23-01 Signature Country Residence: City Huntsville State United States Citizenship US Mailing Address 117 Woodrow Balch Drive Mailing Address 117 Woodrow Balch Drive Huntsville State ΑL Zip 35806-2203 Country United States NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name Family Name (first and middle [if any]) Thomas J or Surname Watson Inventor's Date 10-23-01 Signature Country Residence: City Madison State **United States** Citizenship US Mailing Address 116 Royal Drive

Zip

35758-1772

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Additional inventors are being named on the

*Total of

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number **Application Number Filing Date** 23-Oct-2001 First Named Inventor **POWER OF ATTORNEY OR** Patterson, et al. Data Communications System and Method for Communication **AUTHORIZATION OF AGENT** Between Infrared Devices **Group Art Unit Examiner Name Attorney Docket Number** 00-0895.16 I hereby appoint: 021491 X Practitioners at Customer Number OR Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer OR Number Bar Code Label here Practitioners at Customer Number OR Firm or Individual Name Address Address City State Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Patterson Wade C. Name Signature NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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